FINANCIAL DISCLOSURE STATEMENT	For New Members, Candidates, and New Employees	LEGISI. ATIVE RESOURCE CENTER
Name: Stholey D. Love	Daytime Telephone	U.S. HOUSE OF REPRESENTATIVES
New Member of or Candidate for State: W/C U.S. House of Representatives District: 3/d Candidates - Date of Election:	Check if Amendment	(Office Use Only)
STATUS New Officer or Employee Staff File Employing Office: Shared	Staff Filer Type (If Applicable): Period Covered: January 1, Shared Principal Assistant to	A \$200 penaity shall be assessed against any individual who files more than 30 days late.
PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS	THESE QUESTIONS	
A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	No E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	ng the reporting ves い No lybrase いた ハイン・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the Yes reporting period?	No F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	arrangement with an Yes No No
D. Did you, your spouse, or your dependent child have any reportable Yes liability (more than \$10,000) at any point during the reporting period?	No J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	r years? Yes No
ATTACH THE CORR	-	3,
THIS COMM INCLUDES ONE!	THIS FORM INCLUDES ONLY THE SCHEDOLES THAT TOO AND REMOINED TO COMPLETE	COMPLE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BO		TH OF THESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?	on Ethics and certain other "excepted trusts" need not be disclosed.	Have you excluded Yes No No
EXEMPTION Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	income, or liabilities of a spouse or dependent child because they me ittee on Ethics.	et all three tests for Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Shiely D. Lous

Page 2

읔

Type of Income Type							-	징	9	\$5.0 \$5.0 Provided in the state of the state	For	등 45 년 당 6 등	(do P	exc exc and which		
None Value of Asset Type of Income Yalue of Asset Type of Income Yalue of Asset Yalue	(E11 70000	Trackook Nim, um)	House (OWN MI W)	IRA	ì	ABC Hedge Fund	_		EFF	interest-bearing accounts. If the total is over kinderest-bearing accounts. If the total is over kind, list every financial institution where there is e than \$1,000 in interest-bearing accounts. It is every financial institution where there is extended and other real property held for investment, ide a complete address or description, e.g., tall property," and a city and state. In ownership interest in a privately-held business is not upublicly traded, state the name of the frees, the nature of its activities, and its graphic location in Block A. In ownership interest in a privately second its activities, and any financial result in a californ homes (unless there was rental trades), and any financial rest in, or income derived from, a federal enerth program, including the Thrift Savings Plan. A wheve a privately-traded fund that is an Excepted stiment Fund, please check the "EIF" box. In source is that of your spouse (SP) or andent child (DC), or jointly held with anyone (JT), the optional column on the far left. In a detailed discussion of Schedule A requirements are refer to the instruction booklet.	bank and other cash accounts, total the amount in	all IRAs and other retirement plans (such as (k) plans) provide the value for each asset held in account that exceeds the reporting thresholds.	vide complete names of stocks and mutual funds not use only ticker symbols).	tility (a) each asset held for investment or buction of income and with a fair market value seeding \$1,000 at the end of the reporting period, (b) any other reportable asset or source of income the generated more than \$200 in "unearned" me during the year.	Assets and/or Income Sources	BLOCK A
NONE						:						Ţ				
NONE					ì					\$1-\$1,000	80		in w	cate val a val cify the n assurded		ł
NONE	4	7	×	X			inde			\$1,001-\$15,000	n		Aich is	value luatic ne ma set v		
NONE				<u> </u>		<u> </u>		<u> </u>		\$15,001-\$50-000	0	_	you for a	of as		
NONE		ļ		¦ ∔	<u> </u>	1		<u> </u>		\$50,001-\$100,000	т		have	sset a thod wse i	≤ a	Ì
NONE					<u>.</u>			_	_	\$100,001-\$250,000	71	_}	S hel	at clo othe d. durin	Пe	굗
NONE		<u> </u>	↓	<u> </u>	×	×	<u> </u>	!	_			1	d by	se of	of A	вгоск в
NONE		-	↓	 		ļ	_	<u> </u>	_	·	T.	_	ž, Š	the rap	1880	8
NONE			1	ļ	ļ	<u> </u>	<u> </u>		-4		-	4	spor	eport mari ome,	9ŧ	
NONE				 	-	-	lacksquare	_	_		_	-1	0 65	the v		1
NONE				 	 	<u> </u>	ļ	-					rdep	erioc alue, riod		
NONE							-	-) ende	d. If y plea and shou		
			-	├—		 	-	_	4		Σ.	+				-
			├	 		_	}_	-				4	vione	heck 01(k)		
			.	 	_	 	┝	_ >	-	DIVIDENDS		4	₹ =	RANGE PROPERTY OF TRANSPORT IN		ŀ
	X	X	X	<u> </u>	L.,		<u> </u>		_	RENT			the .	ale to	Ϋ́	ı
				X	X	<u> </u>	_	_	\perp	WTEREST		_	asse ting	ax-de 29 e	9	P
							L			CAPITAL GAINS		_	perio	hat a sferre ccou colu colu pital e dia	* =	вгоск с
		i			:	<u> </u>				EXCEPTED/BLIND TRUST			d.	pply. d incomes. gai	20	°
								İ		TAX-DEFERRED			2	For come your	ne	1
						Partnership Income	Royalties			Other Type of income (Specify: e.g., Partnership Income or Farm Income)			o income	accounts (such as may check (vidends, even if sincome)		
X S1-5200										None	Τ			Che Che		\neg
S201-\$1,000 If no income None Courrent Year		<u>. </u>						×		\$1-\$200 =				asse ets in ttal s		ľ
\$1,001-\$2,500		Ì	<u> </u>	ļ						\$201-\$1,000 =	1	1		ts for discarding lains		
X X S2,501-\$5,000 X X S5,001-\$10,000 X X S5,001-\$10,000 X X S1,000-\$50,000 X X X S2,501-\$10,000 X S2,			!	ļ		_	_	_		\$1,001-\$2,500		.		whice the		ı
St.001-510.000 St.000.000 St.000.000 St.000.001-51.000.000 St.000.001-51.000.000 St.000.001-51.000.000 St.000.001-51.000.000 St.000.001-51.000.000 St.000.001-51.000.000 St.000.000 St.000.001-51.000.000 St.000.000 St.0000.000 St.0000.000 St.0000.000 St.0000.000 St.0000.000 St.00000		1	<u> </u>		<u>:</u>		×		4		15	'l		th you cath		
S15,001-55,00,000 Signature S10,001-51,000,000 Signature S10,001-51,000 Signature S10,001-51,000 Signature S10,001-51,000 Signature S10,001-51,000 Signature S10,001-51,000 Signature S10,001-51,000,000	X		!	×		×	<u></u>	, 			Į.			u che egon rein me v		ł
S50,001-\$100,000 Silvarian			 	<u> </u>		<u> </u>	Ļ	_	4		13	4		of i		- 1
Amount of Income Amount of Income Anount of Income Stock C, you may check the "None" column, For all other to by checking the appropriate box below. Dividents, interest, an Income for assets held in taxable accounts. Preceding Year None Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year Preceding Year Preceding Year None Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year None Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts. Preceding Year None Stock C, you may check the "None" column, For all other stocks as income for assets held in taxable accounts.			:	ļ		<u> </u>	 —	ļ	4					d'Ta		
Sy,000,001-SS,000,000 X		-		ļ	Δ	-		ļ 	4		1			N-Del)	ł
		:	 	 	-		+-	-	\dashv		4			lerred be d gene	Ð	
SpotserO intolline over \$1,00000 If Preceding Year			+		<u> </u>	<u> </u>	+-	<u> </u>	\dashv		-1	1		d" in l cking tsclo ratec	Š	멸
S1-5200		<u>. </u>		-	-	; ;	.	_	\dashv		╀	4		Block I the I sed I.	Ō,	BLOCK D
X S201-\$1,000		<u> </u>	 	 	-	\vdash	╁┈		\dashv			i		emic approx co.y	μÇ	0
S1,001-52,500		-	 	: -	!		+-		+		1	1		ou n ropric ncon	om	
S2,501.55,000			:	<u>:</u>	<u> </u>	 		 	+		1_			hay cl ate bu ne fo	TD.	-{
X X S5.001-515.000		X	X	Ī	:	;	†T		\dashv					heck ox bu if ass		
X \$15,001-\$50,000 Simple Signature	X	-	-	X		:	×	<u>'</u>	7		8			the " elow. sets		
\$50,001-\$100,000 \$ Vear				 	† !	×	Ţ	 I	1					Nonk Div held		
X \$100,001-\$1,000,000 X \$1,000,000 X \$1,000,0						†	-		1					o inte		- {
\$1,000,001-\$5,000,000 ×	_	l		L	X		Ī_	:			٦٩	1		lumn ids, axab		ı
Over \$5,000,000 조 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명 명				:			Ī			\$1,000,001-\$5,000,000 ×				inter		
Soouse(I)C Income over \$1,000,000.										Over \$5,000,000				est, cou		
										Spousei®C Income over \$1,000,000* ≚	L	1		ther and nts.		

Use additional sheets if more space is required.

														àg'à				
													LAND	ASSET NAME			Assets and/or income Sources	BLOCK A
				_	ļ				-								es	
				-	-			_			_		\times	-	None >			_
			-		-	-	\vdash		-			-			\$1-\$1,000 📼	_		
					├				_	1	-				\$1,001-\$15,000	-		
											<u> </u>				\$15,001-\$50,000			
;			_		 	!	<u> </u>	_			-	<u> </u>	_		\$50,001-\$100,000 m		<	
					_	† · · · ·				1		<u> </u>		1	\$100,001-\$250,000 ¬		ᇤ	В
					 	 	<u> </u>								\$250,001-\$500,000 o		of	BLOCK B
															\$500,001-\$1,000,000 ±		Value of Asset	Z
-							ļ —				<u> </u>	<u> </u>			\$1,000,001-\$5,000,000 —		set	
								i				<u> </u>			\$5,000,001-\$25,000,000 -			
															\$25,000,001-\$50,000,000			
															Over \$50,000,000 -			
	1														Spouse/DC Asset over \$1,000,000*			
									-				ス		NONE			
															DIVIDENDS			
		-				†	_				Ι				RENT		_	
····			-		-		-		<u> </u>	-		\vdash			INTEREST	-1	Type of Income	_
			├—	-		-				 		<u> </u>			CAPITAL GAINS		ğ	BLOCK C
			ļ.——			 				\vdash		ļ	-	<u> </u>		-	Σ	웃
				-								_			EXCEPTED/8LIND TRUST		ě	.,
															TAX-DEFERRED Other Type of Income (Specify: e.g.,		ā	
															Partnership income or Farm Income)			
													X		None -			
							<u> </u>						1		\$1-\$200 =	1		
															\$201-\$1,000 =			
					!	<u> </u>							Ш		\$1,001-\$2,500 <	\Box		
			ļ				<u> </u>				<u> </u>				\$2,501-\$5,000 < \$2,501-\$15,000 ≤ \$3,001-\$15,000 ≦ \$3,001-\$10,000 ≦ \$3,001-\$100,000 € \$3,001-\$100,000	(
							ļ							ldot	\$5,001-\$15,000 ≤			,
 	L	ļ		<u> </u>	<u> </u>	<u> </u>	ļ	_			<u> </u>	<u> </u>	<u> </u>		\$15,001-\$50,000 <u>≤</u>	<u> </u>		
						!	<u></u>			ļ						į		
			<u> </u>							<u> </u>	<u> </u>				\$100,001-\$1,000,000	1		Ì
			Ļ	!	ļ		 	<u> </u>	<u></u>			<u> </u>		<u> </u>	\$1,000,001-\$5,000,000 ×		Ψ	
		<u> </u>	<u> </u>				<u> </u>				<u> </u>				Over \$5,000,000 ×		Amount of Income	밆
					<u> </u>							<u> </u>	;		Spouse/DC Income over \$1,000,000*	4	o o	вгоск в
				<u> </u>		<u> </u>		_				<u> </u>	X	\vdash	None –	-	کِّ	Ö
		<u> </u>		<u>, </u>	!	į I	ļ			 	<u>!</u>	<u> </u>			\$1-\$200 =		ΜO	ĺ
				<u> </u>	<u> </u>	-	!			<u> </u>					\$201-\$1,000		ĕ	
				<u> </u>	! 									\vdash	\$1,001-\$2,500 <	?		
				<u> </u>	<u> </u>		<u> </u>			-		<u> </u>	 		\$2,501-\$5,000 < 0	1		
				 	<u>. </u>					<u> </u>					\$2,501-\$5,000 < \$2,501-\$15,000	1		
					<u> </u>	 - 									\$15,001-\$50,000 \(\leq\) 550,001-\$100,000 \(\leq\) 6	;		
- - 			_		-						<u>-</u> -		-		\$50,001-\$100,000 \(\frac{\leq}{20}\)			
	i							-		<u> </u>					3100,001-91,000,000	1		
 	_				 		<u> </u>			-					\$1,000,001-\$5,000,000 × Over \$5,000,000 ×			
-++					<u></u>			_		-	<u> </u>					1		
	- 1									!			'		Spouse/DC Income over \$1,000,000° ≧			

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: Skinky D. Love

Page 3

SCHEDULE C - EARNED INCOME

Name: SLIPPLY 0, 2016 Page_

					Syna Foundation	STATE OF MU	Ontario County Board of Education	Examples: State of Maryland Cot. 2)	ABC Trade Association, Baltimore, MD (July 15)	Source (include date of receipt for honoraria)		List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Viembers and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.
				/	Salvey	Solvel	Spouse Salary	Selary Spouse Speech	Honorarium	Туре		yment by the U.S. governmed income exceeding \$1,0 efits received under the Soc may apply to you after yos \$27,765. In addition, certs.
					24000	20,000 page	N/A	\$20,000 \$0	\$0	Current Year to Filing	Am	ment) totaling \$200 or more during the ,000. See examples below. cial Security Act. /ou are on House payroll. The 2016 rain types of income (notably honorar
					soot 5	مهر سرم دوه برو	N/A	\$76,000 \$1,000	\$500	Preceding Year	Amount	e reporting period. For both the filer it limit on outside earned income for ia, director's fees, and payments for

SCHEDULE D - LIABILITIES

Name: Straig D. Love	Page 5 of C	
		İ
the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting by real property including mortgages on their personal residence.	nt owed during the reporting	
sehold furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and	you are personally liable); and	

liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during period. New Members: Members are required to report all liabilities secure (unless you rent it out or are a Member); loans secured by automobiles, hou evolving charge account (i.e., credit card) only it the balance at the close of the reporting period

					SP. DC. JT		•
				Example			
			NA -	First Bank of Wilmington, DE	Creditor		
				5/98	Liability Incurred MO/YR)	
				Mortgage on Rental Property, Dover, DE	Type of Liability		
		-			\$10,001- \$15,000	≯	
					\$15,001- \$50,000	œ	
					\$50,001- \$100,000	6	
				×	\$100,001- \$250,000	0	$\Big _{\scriptscriptstyle{lack}}\Big $
		;			\$250,001- \$500,000	m	Amount of Liability
					\$500,001- \$1,000,000	TI	of Li
					\$1,000,001- \$5,000,000	6	ability
					\$5,000,001- \$25,000,000	π	
					\$25,000,001- \$50,000,000	_	
					Over \$50,000,000	٠	
					Over \$1,000,000* (Spouse/DC Liability)	× _	

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

			Position
		- NA	Name of Organization

SCHEDULE

F - AGREEMENTS Name: Stack D. 1000 Page Co.	Page 6 of 6	
arties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; erral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former.	ernment service; ned by a former	

Identify the date, pacentinuation or defe 9

1 NA		
- NA		

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

Source (Name and City/State) Doe Jones & Smith, Homestate Accounting Services Accounting Services Accounting Services		
Doe Jones & Smith, Hometown, Homestate	Source (Name and City/State)	Brief Description of Duties
		Accounting Services
		- NN -